ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  
   Jennifer

2. Surname (Last Name)  
   Waljee

3. Date  
   01-July-2018

4. Are you the corresponding author?  
   [ ] Yes  
   [x] No

   Corresponding Author's Name  
   James R. Holmes, MD

5. Manuscript Title  
   New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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Are there any relevant conflicts of interest?  
   [ ] Yes  
   [x] No

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   [x] Yes  
   [ ] No

If yes, please fill out the appropriate information below.

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<thead>
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Section 4. **Intellectual Property -- Patents & Copyrights**

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  
☐ Yes  ✔ No

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Section 6. **Disclosure Statement**

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Dr. Waljee reports grants from R01 DA042859, grants from NIAMS P50 AR070600, grants from AHRQ K08HS023313, other from University of Michigan Dean’s Office - Michigan Genomics Initiative and Precision Health Initiative, grants from American College of Surgeons, grants from American Foundation for Surgery of the Hand, grants from Substance Abuse and Mental Health Services Administration (SAMHSA), grants from Michigan Department of Health and Human Services, other from University of Michigan Precision Health Initiative, outside the submitted work.
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Royalties: Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)  Chad  
2. Surname (Last Name)  Brummett  
3. Date  25-June-2018  
4. Are you the corresponding author?  Yes ☑ No  
   Corresponding Author’s Name  James R. Holmes, MD  
5. Manuscript Title  
   New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus  
6. Manuscript Identifying Number (if you know it)  

Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  

Are there any relevant conflicts of interest?  Yes ☑ No  

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Are there any relevant conflicts of interest?  Yes ☑ No  

If yes, please fill out the appropriate information below.

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<td>Institutional funding</td>
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### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- Yes  ✔  No

If yes, please fill out the appropriate information below. If you have more than one entity press the "ADD" button to add a row. Excess rows can be removed by pressing the “X” button.

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</table>

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Dr. Brummett reports personal fees from Recro Pharma Inc, personal fees from Heron Therapeutics, grants from NIH-DHHS-US-17-PAF02680 (R01 DA042859-05), grants from NIH-DHHS-US-16-PAF06270 (R01 HD088712-05), grants from NIH-DHHS-US-16 PAF 07628 (R01 NR017096-05), grants from NIH-DHHS-US (K23 DA038718-04), grants from MDHHS (Sub K Michigan OPEN), grants from NIH-DHHS (P50 AR070600-05 CORT), grants from NIDA (Centralized Pain Opioid Non-Responsiveness R01 DA038261-05), other from UM Michigan Genomics Initiative, outside the submitted work; In addition, Dr. Brummett has a patent Peripheral Perineural Dexmedetomidine (no royalties) issued.

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## Section 1. Identifying Information

1. **Given Name (First Name)**
   Fred

2. **Surname (Last Name)**
   Finney

3. **Date**
   04-July-2018

4. **Are you the corresponding author?**
   Yes ✔ No

**Corresponding Author’s Name**

James R. Holmes, MD

5. **Manuscript Title**
   New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus

6. **Manuscript Identifying Number (if you know it)**

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Are there any relevant conflicts of interest? Yes ✔ No

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Dr. Finney has nothing to disclose.

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1. Given Name (First Name)  
   Timothy

2. Surname (Last Name)  
   Gossett

3. Date  
   04-July-2018

4. Are you the corresponding author?  
   Yes ☐  No ☑

   Corresponding Author's Name  
   James R. Holmes, MD

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   Yes ☐  No ☑
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Dr. Gossett has nothing to disclose.

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**Royalties:** Funds are coming in to you or your institution due to your patent
ICMJE Form for Disclosure of Potential Conflicts of Interest

### Section 1. Identifying Information

1. **Given Name (First Name)**  
   James

2. **Surname (Last Name)**  
   Holmes

3. **Date**  
   27-June-2018

4. **Are you the corresponding author?**  
   ✔ Yes  
   No

5. **Manuscript Title**  
   New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus

6. **Manuscript Identifying Number (if you know it)**

### Section 2. The Work Under Consideration for Publication

Did you or your institution at any time receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?  

Are there any relevant conflicts of interest?  

- Yes  
- ✔ No

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Are there any relevant conflicts of interest?  

- Yes  
- ✔ No

### Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work?  

- Yes  
- ✔ No
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Section 1. Identifying Information

1. Given Name (First Name)  Paul
2. Surname (Last Name) Talusan
3. Date 27-June-2018
4. Are you the corresponding author?  ☑ Yes  ☐ No
   Corresponding Author’s Name  James R. Holmes, MD
5. Manuscript Title
   New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus
6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

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- Are there any relevant conflicts of interest?  ☑ Yes  ☐ No
- If yes, please fill out the appropriate information below.

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<th>Name of Entity</th>
<th>Grant?</th>
<th>Personal Fees?</th>
<th>Non-Financial Support?</th>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>Research grant</td>
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<td>☑ Yes</td>
<td>☐</td>
<td>☐</td>
<td>Honorarium for lecture</td>
</tr>
</tbody>
</table>

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Dr. Talusan reports grants from Paragon 28, personal fees from Paragon 28, outside the submitted work;

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Section 1. Identifying Information

1. Given Name (First Name)  
Hsou Mei

2. Surname (Last Name)  
Hu

3. Date  
23-June-2018

4. Are you the corresponding author?  
Yes ✔ No

Corresponding Author’s Name  
James R. Holmes

5. Manuscript Title  
New Persistent Opioid Use Following Common Forefoot Procedures for Treatment of Hallux Valgus

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